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FACSIMILE SUBMISSION UNDER 37 CFR 1.8

TO:	FROM:
Mail Stop Amendments	Steven J. Shumaker
COMPANY:	DATE:
U.S. Patent & Trademark Office	DECEMBER 14, 2005
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
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PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
	1023-288US01
RE:	APPLICATION SERIAL NUMBER:
Supplemental Information Disclosure Statement	10/693,012

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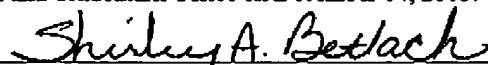
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PATENTIN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Alex C. Toy; John W. Forsberg	Confirmation No.	9367
Serial No.:	10/693,012		
Filed:	October 24, 2003	Customer No.:	28863
Examiner:	Unknown		
Group Art Unit:	3762	Docket No.:	1023-288US01
Title:	MEDICAL DEVICE PROGRAMMER WITH REDUCED-NOISE POWER SUPPLY		

CERTIFICATE UNDER 37 CFR 1.8 I hereby certify that this correspondence is being transmitted via facsimile to the United States Patent and Trademark Office on December 14, 2005.

By:



Name: Shirley A. Betlach

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Mail Stop Amendments
Commissioner for Patents
Alexandria, VA 22313-1450

Dear Sir:

Applicant submits the references listed on the attached form PTO-1449. This statement is being filed, to the best of Applicant's knowledge, before the receipt of a first Office Action on the merits.

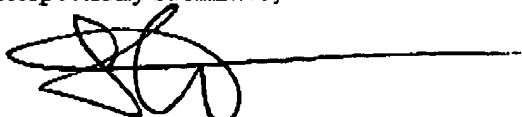
Copies of the U.S. patents and U.S. patent publications are not enclosed as this requirement has been waived by the U.S. Patent Office.

Respectfully submitted,

Date:

12-14-05

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Page 1 of 1

Form 1449*		Docket Number: 1023-288US01		Application Number: 10/693,012	
INFORMATION DISCLOSURE STATEMENT IN AN APPLICATION (Use several sheets if necessary)		Applicant: Alex C. Toy; John W. Forsberg			
		Filing Date: October 24, 2003		Group Art Unit: 3762	
		Examiner Name: Unknown			
U.S. PATENT DOCUMENTS					
Examiner Initial	Document Number	Issue/Document Publication Date	Name	Filing Date If Appropriate	
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FOREIGN PATENT DOCUMENTS					
Examiner Initial	Document Number	Publication Date	Country	Translation	
				Yes	No
OTHER DOCUMENTS (Including Authors, Title of Item, Page(s), Vol/Issue No., Publisher, Place of Publication)					
EXAMINER			Date Considered		

*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Based on Form PTO-FB-AR20
(Also form PTO-1449)

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